9 - BIT Follow-up Responses

Friday, February 19, 2016
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FY17 APPROPRIATIONS COMMITTEE QUESTION 01/22/16

1. List the type of equipment the State invests in, brand name, $$ invested, amount depreciated, etc. (Tidemann)

Computers Installed by Computer Vendor (01/25/2016)

Vendor	**Number installed**
Acer	4
Apple	1
Dell	54
Gateway	356
HP	8,121
Microsoft	150
Motion	1
Panasonic	205
Trimble	3
VMWare	9
Total	8,904

Laptop & Desktop computer Purchases (FY15) by Vendor

Vendor	**Total**		
Hewlett-Packard	$1,351,654.81		
		Desktops	$757,163.96
		Portables	$594,490.85
Apple	$55,623.60		
		Portables	$17,321.50
		Tablets	$38,302.10
Asus	$3,041.13	Portables	
Lenovo	$989.27	Portables	
Microsoft	$104,810.79	Tablets	
Panasonic	$4,372.61	Portables	
Samsung	$8,135.44	Tablets	

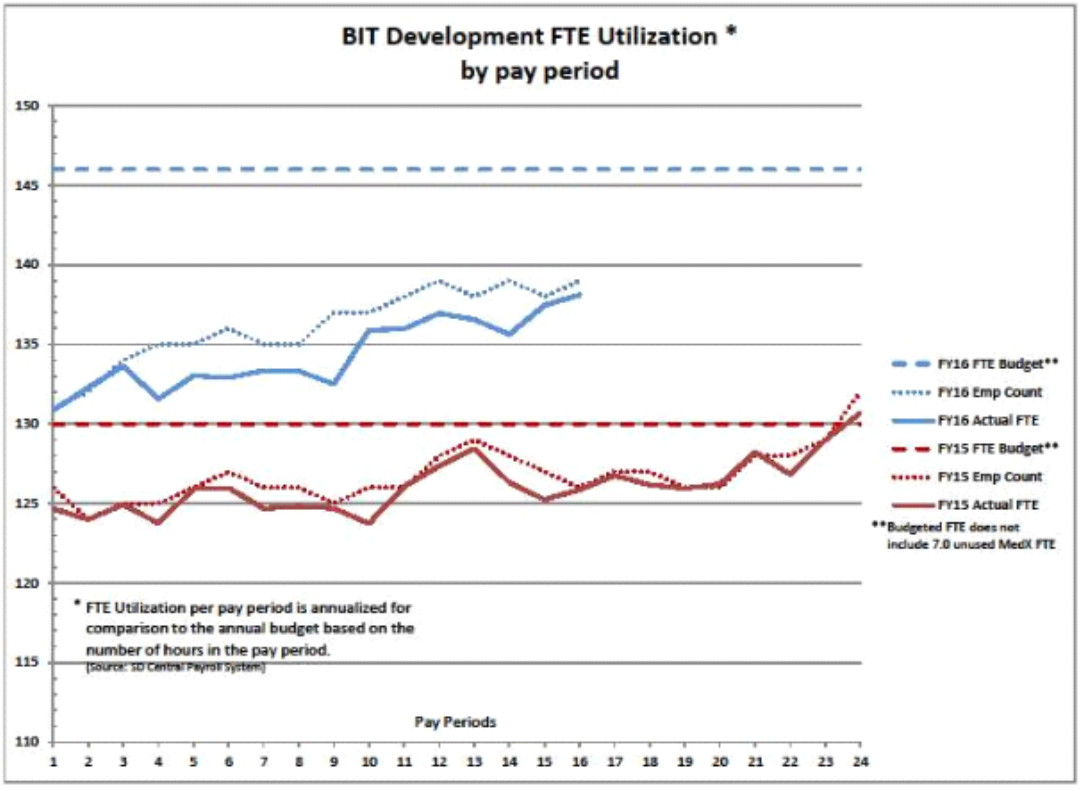
2. List of backlog for Agency projects (Heineman) (are we fulfilling our mission to deliver applications to agencies as they demand)?

Agency	Hours	Major Components
ATG	1,800	Criminal History upgrade
BFM	4,800	Lawson upgrades (multi-year)
BHR	9,700	FY17 Enrollment, Life Insurance, security mandates
BIT	4,300	Billing system update
DENR	9,400	FoxPro Migrations
DHS	3,800	
DLR	30,430	Workers Compensation, Unemployment Insurance: Employer Registration, Claims, Accounting, Monetary Determination
DOA	1,800	Burn Permit, Contract Management
DOC	1,000	
DOE	2,050	Longitudinal Data System, Accreditation
DOH	710	
DOR	17,800	SD Cars, Plate on Demand, CEDAR
DOT	21,350	Construction Measurement & Payment update, Materials Sampling & Testing update, Asset Dashboard
DPS	3,600	Driver's License enhancements
DSS	388,526	Child Support, Child Services, EA Eligibility,SEC-IT, SEC-Medicaid, Medicaid Expansion not included
GFP	4,600	Licensing updates
Economic Development	900	
Governor	300	
Military	500	
PUC	400	
SDRS	8,050	Conversion, Statutory changes, "Generational" changes not included
Tourism	900	
Treasurer	100	
Veteran Affairs	100	
Total	516,916	

3. Information on unused FTEs over the past 6 months – agency, fund source, & amount (Peters)

Below is a graph of FY15 and FY16 FTE utilization in Development. There are 3 data series for each year:

- FTE Budget (not including the 7 intentionally unused MedX FTE)
- Actual FTE utilization, annualized by pay period
- Count of Employees utilizing at least some portion of an FTE in each pay period



The graph above depicts:

- Outside the FTE provided specifically for MedX, in FY2015 BIT Development was functioning at a level consistent with normal turnover for an agency with a large number of authorized FTE. Toward the end of FY2015, Development began hiring in recognition of new FTE authorized for FY2016 – 16.0 appropriated developers.
- Development has continued to aggressively recruit developers and has been filling positions steadily through FY2016 to meet the demands client agencies. BIT Development fully expects to end FY16 at or very close to the authorized staffing level.

4. Is there a comparison of BIT to other states showing productivity (Partridge)
   Not only is there no national collection of common technology applications/services utilized by the various states, there is no common measure of productivity. BIT has contacted technology agencies supporting the surrounding states with the goal of identifying common technology services and productivity measures.

5. Breakdown of Medx FTE – how many are dedicated to MMIS/Provider enrollment (Heineman)

BIT MEDX FTE History

MEDX agreement signed June 24, 2008 – project initiated in FY09

BIT allocated 8 MEDX FTE in FY09 budget process. These positions were filled in FY09 as MEDX efforts ramped up. All 8 positions authorized in FY09 budget were filled and utilized through FY10 and into FY11 until work efforts were halted.

MEDX project in hiatus under notice of termination beginning October, 2010 BIT retained the 8 MEDX FTE.

Through the remainder of FY10 and FY11, the 6 Development FTE were assigned to other DSS related projects; during this time 1 of the 6 MEDX FTE in Development resigned – this position then remained vacant. The 2 MEDX FTE assigned to the Data Center also left BIT to pursue other opportunities and their positions, too, remained vacant.

The FY12 budget process removed 8.5 FTE including the 3 vacant MEDX FTE. BIT began FY12 with 5 MEDX FTE all working on other DSS projects.

In addition the FY12 budget process resulted in organizational changes which transferred portions of the Department of Human Services to the Department of Social Services. This also transferred the responsibility for maintenance of the Behavior Health STARS system and the Human Services Center Avatar system into the DSS support team (which is also responsible for MEDX). Over the past two years the STARS system was rewritten and is now in maintenance. Avatar is a proprietary system installed on the state infrastructure.

In the FY14 budget process, anticipating re-engagement with the MEDX vendor, BIT was allocated another 2 MEDX FTE for a total of 7 MEDX FTE. During FY14 BIT filled 1 of the 2 newly authorized MEDX FTE but held back from filling the 2nd as re-engagement appeared to lag. At the end of FY14 BIT had 7 MEDX FTE – 6 filled, 1 vacant. Through FY14 these staff supported MEDX re-engagement activities and other DSS application maintenance/development efforts.

In the FY15 budget process, again anticipating imminent re-engagement with the MEDX vendor, BIT was allocated 9 additional MEDX FTE. BIT entered FY 15 with 16 MEDX FTE with 6 filled. During FY15 re-engagement efforts ended, BIT did not fill the 9 MEDX FTE authorized in FY15 nor the remaining second of the 2 MEDX FTE authorized in FY14. BIT ended FY15 with 16 MEDX FTE; 6 filled.

No additional MEDX FTE were either authorized or eliminated for FY16.

Origins of the 6 filled FTE: The 5 FTE remaining of the initial 8 MEDX FTE provided in FY09 plus 1 of the 2 FTE provided in FY14.

Origins of the 10 unfilled FTE: 1 of the 2 FTE provided in FY14 plus the 9 FTE provided in FY15.

The 6 MEDX FTE currently filled continue to work on DSS related activities. Current efforts are directed to maintenance of the MMIS legacy mainframe system (efforts include claims processing, ICD-10 update, TMSIS update), Child Care systems, Adult Services and Aging systems (Case Mix system – helps determine level of care rates for Nursing Home eligible clients), HIPPA transactions (converted from JCAPS to WebMethods tool).